PROFORMA - II

SSC PUBLIC EXAMINATIONS, MARCH 2013

ISSUE OF MAIN / ADDITIONAL ANSWER BOOKS IN THE ROOMS BY THE INVIGILATOR

(To be given by the Invigilator to the Chief Superintendent after completion of the examination)

CENTRE NO : Date:

CENTRE NAME : Subject Code:

Room No.

No. of Candidates Allotted to the Room:	Name of the Invigilator	Main Answer Books			Additional Answer Books			Returned unused Main Answer Books			Returned unused Addl.Answer Books			Roll No. of the Absentees	Signature of the Invigilator
		From	To	Total	From	To	Total	From	To	Total	From	To	Total		
1	**2.**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**	**15**	**16**

Signature of the Invigilator

PROFORMA-III

SSC PUBLIC EXAMINATIONS, MARCH, 2013

CODED MAIN AND ADDITIONAL BOOK ACCOUNT
(To be filled by the Invigilator)

Centre No. & Name: Date:

Paper Code & Name: Room No:

Roll Number	Serial No. of Main Answer books issued	Serial No. of Additional answer books issued			Signature of the Candidate
		1st Addl.	2nd Addl.	3rd Addl.	

Item	Received	Used	Balance
No. of Main Answer Books			
No. of Additional Answer Books			

SIGNATURE OF INVIGILATOR

PROFORMA – IV

SSC PUBLIC EXAMINATIONS MARCH 2013
MAIN ANSWER BOOKS AND ADDITIONAL ANSWER SHEETS ACCOUNT
CONSOLIDATED SATEMENT OF RECEIPTS AND ISSUES OF CODED ANSWER BOOKS, ADDITIONAL ANSWER BOOKS AND PAPER STICKERS

(To be maintained and furnished by the Chief Superintendent & Departmental Officer to the DEO & DGE)

District Code and Name: **Centre Number and Name:**

Sl.No.	Date	Number of Candidates allotted	Paper Code	Main Answer Books			Additional Answer Sheets			Paper Sticker			Remarks
				Opening Balance	Used	Closing Balance	Opening Balance	Used	Closing Balance	Opening Balance	Used	Closing Balance	
	Total												

Signature of the Departmental Officer **Signature of the Chief Superintendent**

PROFORMA –V

Consolidated Statement Showing the Blank Bar Coded OMR Sheets used.

Center No. & Name:

Sl.No.	Date of Examination	Roll Number	Paper Code & Name	Sl.No of Blank Bar coded OMR used

Signature of the
Departmental Officer

Signature of
Chief Superintendent

- Day wise reports shall be prepared and sent to the O/o the Director of Government Examinations along with other Center Material.
- If no blank OMR Sheets are used 'Nil' report must be submitted day wise separately for paper I and paper II.

Note: The Invigilator shall write each Roll Number along with Blank Bar-coded OMR sheet used for each paper code.

PROFORMA -VI
SSC PUBLIC EXAMINATIONS. MARCH, 2013

ACCOUNT FOR NON-STANDARD BARCODED OMR SHEETS USED
(BLANK OMR SHEETS USED)

Centre No. & Name :
Room No.: Date:

Roll Number	Paper Code	Sl.No. of Blank Barcoded OMR used	Signature of the candidate

SIGNATURE OF THE INVIGILATOR

- This Statement shall be obtained from the invigilator daily.
- If blank OMRs are not used a 'Nil' report shall be obtained from the Invigilator compulsorily.